



Saint Louis University

If you have further questions, please contact sfs@slu.edu or call Student Financial Services at (314)977-2350.

ANNUAL FINANCIAL RESPONSIBILITY AGREEMENT

I fully understand and agree that my authorization to enroll and continue to register for courses at Saint Louis University is expressly conditioned on my acceptance of the terms and conditions set forth below. In exchange for the opportunity to enroll at Saint Louis University, to receive educational services, and for other valuable consideration, I agree to the following terms and conditions:

INSTRUCTIONS: Please select the check box and click the "I Accept" button at the end of this Agreement to indicate your acceptance of these terms and conditions, the statement next to the check box, and the information provided in the additional information links contained in this Agreement.

PAYMENT OF FEES/PROMISE TO PAY

I understand that when I register for any class at Saint Louis University or receive any service from Saint Louis University I accept full responsibility to pay all tuition, fees and other associated costs assessed as a result of my registration and/or receipt of services no matter the delivery method or timing. I further understand and agree that my registration and acceptance of these terms constitutes a promissory note agreement (i.e., a financial obligation in the form of an educational loan as defined by the U.S. Bankruptcy Code at 11 U.S.C. §523(a)(8)) in which Saint Louis University is providing me educational services, deferring some or all of my payment obligation for those services, and I promise to pay for all assessed tuition, fees and other associated costs by the published or assigned due date.)

I understand and agree that if I drop or withdraw from some or all of the classes for which I register, I will be responsible for paying all or a portion of tuition and fees in accordance with the published tuition refund schedule located in [Saint Louis University's tuition refund policy](#). I have read the terms and conditions of the published tuition refund schedule and understand those terms are incorporated herein by reference. I further understand that my failure to attend class or receive a bill does not absolve me of my financial responsibility as described above.

METHOD OF BILLING

I understand that Saint Louis University uses electronic billing (e-bill) as its official billing method, and therefore I am responsible for viewing and paying my student account e-bill by the scheduled due date. I further understand that failure to review my e-bill does not constitute a valid reason for not paying my bill on time. E-bill information is available at [Billing and Payment](#).

BILLING ERRORS

I understand that administrative, clerical or technical billing errors do not absolve me of my financial responsibility to pay the correct amount of tuition, fees and other associated financial obligations assessed because of my registration at Saint Louis University.

RETURNED PAYMENTS/FAILED PAYMENT AGREEMENTS

If a payment made to my student account is returned by the bank for any reason, I agree to repay the original amount of the payment plus a returned payment fee of \$25. Tuition and fee information can be found at the [Tuition and Fees](#) page. I understand that multiple returned payments and/or failure to comply with the terms of any payment plan or agreement I sign with Saint Louis University may result in cancellation of my classes and/or suspension of my eligibility to register for future classes at Saint Louis University.

WITHDRAWAL

If I decide to completely withdraw from Saint Louis University, I will follow the instructions at [Withdrawal and Enrollment Changes website](#), which I understand and agree are incorporated herein by reference. I further understand that, if withdrawing, I must also check policies established by my college/major, and by Residential Life.

DELINQUENT ACCOUNT/COLLECTION

Financial Hold: I understand and agree that if I fail to pay my student account bill or any monies due and owing Saint Louis University by the scheduled due date, Saint Louis University will place a financial hold on my student account, preventing me from registering for future classes, requesting transcripts, or receiving my diploma.

Late Payment Charge/Collection Agency Fees: I understand that, if I fail to pay my student account bill or other monies owing to Saint Louis University by the scheduled due date, and fail to make acceptable payment arrangements to bring my account current, Saint Louis University may refer my delinquent account to a collection agency. I further understand that if Saint Louis University refers my student account balance to a third party for collection, a collection fee will be assessed and will be due in full at the time of the referral to the third party. The collection fee will be calculated based on the amount of the outstanding account balance, up to the maximum amount permitted by applicable law. For purposes of this provision, the third party may be a debt collection company or an attorney. If a lawsuit is filed to recover an outstanding balance, I shall also be responsible for any costs associated with the lawsuit such as court costs or other applicable costs. Finally, I understand that my delinquent account may be reported to one or more of the national credit bureaus.

COMMUNICATION

Method of Communication: I understand and agree that Saint Louis University uses e-mail as an official method of communication with me, and that therefore I am responsible for reading the e-mails I receive from Saint Louis University on a timely basis.

Contact: I authorize Saint Louis University and its agents and contractors to contact me at my current and any future cellular phone number(s), email address(es) or wireless device(s) regarding my delinquent student account(s)/loan(s), any other debt I owe to Saint Louis University, or to receive general information from Saint Louis University. I authorize Saint Louis University and its agents and contractors to use automated telephone dialing equipment, artificial or pre-recorded voice or text messages, and personal calls and emails, in their efforts to contact me. Furthermore, I understand that I may withdraw my consent to call my cellular telephone using automated telephone dialing equipment by submitting my request in writing to Student Financial Services, One Grand Boulevard, DuBourg Hall, Room 119, St. Louis, MO. 63103 or in writing to the applicable contractor or agent contacting me on behalf of Saint Louis University.

Updating Contact Information: I understand and agree that I am responsible for keeping Saint Louis University records up to date with my current physical addresses, email addresses, and phone numbers by following the procedure at [SLU People Finder Corrections](#). The linked procedure is incorporated herein by reference. Upon leaving Saint Louis University for any reason, it is my responsibility to provide Saint Louis University with updated contact information for purposes of continued communication regarding any amounts that remain due and owing to Saint Louis University.

IRS FORM 1098-T

I agree to provide my Social Security number (SSN) or taxpayer identification number (TIN) to Saint Louis University upon request as required by Internal Revenue Service (IRS) regulations for Form 1098-T reporting purposes. If I fail to provide my SSN or TIN to Saint Louis University, I agree to pay any and all IRS fines assessed as a result of my missing SSN/TIN.

I consent to receive my annual IRS Form 1098-T, Tuition Statement, electronically from Saint Louis University. I understand that if I do not consent to receive my Form 1098-T electronically, a paper copy will be provided. I understand that I can withdraw this consent or request a paper copy by following the instructions at [Paying Your Bill website, under 1098-T Forms](#).

STUDENT AGE

I understand and agree that if I am younger than the applicable age of majority when I execute this agreement that the educational services provided by Saint Louis University are a necessity, and I am contractually obligated pursuant to the “doctrine of necessities.”

PRIVACY RIGHTS & RESPONSIBILITIES/ MISCELLANEOUS

I understand that Saint Louis University is bound by the [Family Educational Rights and Privacy Act \(FERPA\)](#) which prohibits Saint Louis University from releasing any information from my education record without my written permission. Therefore, I understand that if I want Saint Louis University to share information from my education record with someone else, I must provide written permission by following the procedure outlined at the [FERPA at Saint Louis University website](#). I further understand that I may revoke my permission at any time as instructed in the same procedure.

This agreement supersedes any previous understandings, representations or correspondence between myself and Saint Louis University regarding the specific terms and conditions contained in this agreement, and cannot be modified or affected by any course of dealing or course of performance. This agreement may be modified by Saint Louis University if the modification is signed by me (electronically or otherwise).

If any provision of this agreement, or any amount charged under this agreement, is determined to be illegal or unenforceable, the remaining provisions of the agreement will remain valid and enforceable to the extent permitted by law. This agreement and the performance of this agreement are governed by the laws of the Commonwealth of Missouri, without giving effect to its principles of conflict of laws, and I agree that the state and federal courts located in Missouri will have jurisdiction to resolve any dispute arising out of this agreement. This agreement will remain in full force and effect for as long as I am enrolled in any class or program at Saint Louis University, and thereafter for as long as I owe any amount of money to Saint Louis University.

By selecting the "I accept" button, I understand and agree that I am signing this agreement electronically and my electronic signature is the legal equivalent of my manual signature on this agreement under Missouri state law. I understand and agree that the electronic signature appearing on this agreement is the same as my handwritten signature for purposes of validity, enforceability and admissibility.

☐ **I ACCEPT**

Name: _____ Banner ID: _____
First Name, Last Name

Student Email: _____ Date: _____
first.last@slu.edu MM/DD/YYCC

Please scan and return PDF to sfs@slu.edu or by mail to:

Saint Louis University
1 N. Grand Boulevard
DuBourg Hall, Room 119
St. Louis, MO 63103 (314) 977-2350

